Please place your photo here. Photo to be signed and dated.



Section 2 - To be completed by any 'new' persons who are or will be engaged in giving hands on treatment.

## Treatment includes massage, aromatherapy, etc

Each person must sign to confirm his or her details

<u>Practitioners must supply a recent passport-sized photograph for identification purposes, signed and dated on the reverse</u>

## PLEASE COMPLETE IN BLACK INK AND IN BLOCK CAPITALS

1	Full name	
-	Mr / Mrs / Miss / Ms	
2	Maiden/Former name(s)	
3	Date of Birth	
5	Date of Birth	
4	Place of Birth	
5	Full home address	
5	i uli nome address	
_	Destina Talambana Numban	
6	Daytime Telephone Number	
7	Email Address	
0	Oh	
8	Give details of technical qualifications,	
	training courses, diplomas, experience etc.	
	of the applicant for the carrying on of that	
	business. Evidence of qualifications <u>must</u>	
	be submitted. Original certificates must be	
	provided, (photocopies will not be	
	accepted.)	
	Han a compute about if management	
	Use a separate sheet if necessary	
9	Has the <b>practitioner</b> been convicted under	
	the Sexual Offences Acts 1956 to 1985 or	□ No
	the	
	Street Offences Act 1959.	☐ Yes
	(Please tick the appropriate box)	

10	Has the <b>practitioner</b> been convicted of any other criminal offences? (Please tick the appropriate box)	□ No
	N.B. Criminal convictions are not an	
	automatic bar to the granting of a Licence.	
11	Name, address and telephone number of the Premise where you will be an authorised practitioner?	
	ration: I declare that the information that I	have provided is correct to the best of my

D knowledge and understand that I will be guilty of an offence if I knowingly provide false information.

Signature	Date
Signature	Date

This form may be photocopied as many times as necessary such that all practitioners can provide their details

## **Privacy Notice**

We will use the information provided by you for assessing your application. The basis under which the Council uses personal data for this purpose is Legal Obligation.

The information provided by you includes the following special categories of personal data

- genetic/biometric data
- criminal history

Information in these categories is used by the Council on the basis that such use is necessary for reasons of substantial public interest, and in accordance with the provisions of the Data Protection Act 2018.

The information that you have provided will be kept in accordance with the Council's retention schedule which can be found at www.mansfield.gov.uk/Privacy

The information provided by you may also be used for the purpose of any other function carried out by the Council. Information about these functions and the legal basis on which information is used by them, your rights and the Council's Data Protection Officer (DPO) can be found on the Council's detailed privacy notice which can be found at www.mansfield.gov.uk/Privacy on the Council's website or requesting a copy by writing to:

The Data Protection Officer

Mansfield District Council, Chesterfield Road South, Mansfield, Nottinghamshire. NG19 7BH.